

WEST**End of Result Set**☐ **Generate Collection** **Print**

L1: Entry 1 of 1

File: USPT

Oct 23, 2001

US-PAT-NO: 6306826

DOCUMENT-IDENTIFIER: US 6306826 B1

**** See image for Certificate of Correction ****

TITLE: Treatment of heart failure with growth hormone

DATE-ISSUED: October 23, 2001

INVENTOR-INFORMATION:

NAME	CITY	STATE	ZIP CODE	COUNTRY
Ross, Jr.; John	La Jolla	CA		
Chien; Kenneth R.	La Jolla	CA		

US-CL-CURRENT: 514/12; 514/2, 530/399

CLAIMS:

What is claimed is:

1. A method for treating heart failure after myocardial infarction in a subject, comprising:

a) administering an angiotensin II (AT.sub.1) receptor inhibitor daily in a dosage of about 12.5 mg/day to about 50 mg/day to said subject for an initial period beginning from about the time of myocardial infarction to about 10 to about 12 weeks;

b) reducing administration of the angiotensin II (AT.sub.1) receptor inhibitor following the about 10 to about 12 week period; and

c) administering growth hormone beginning after the reduction of AT.sub.1 receptor inhibitor.

2. The method of claim 1, wherein the AT.sub.1 receptor inhibitor is administered twice daily.

3. The method of claim 1, wherein AT.sub.1 receptor inhibitor administration is discontinued following the about 10 to about 12 week period.

4. The method of claim 1, wherein AT.sub.1 receptor inhibitor administration is reduced to about one half the dosage following the about 10 to about 12 week period.

5. The method of claim 1, wherein said AT.sub.1 receptor inhibitor comprises losartan.

6. The method of claim 1, wherein said growth hormone is administered for about two weeks to about three months.

7. The method of claim 1, wherein the reducing of AT.sub.1 receptor inhibitor allows for a favorable physiologic hypertrophic effect from the growth hormone.

8. A method of treating heart failure in a subject following an ischemic event, comprising;

a) administering an angiotensin II (AT.sub.1) receptor inhibitor daily in a dosage of about 12.5 mg/day to about 50 mg/day to said subject over a period beginning about the time of said ischemic event, and continuing for a period sufficient to substantially permit favorable left ventricular remodeling or limit unfavorable ventricular remodeling;

b) decreasing the dosage of AT.sub.1 receptor inhibitor at a time approximately after said ventricular remodeling period; and

c) administering a growth hormone to said subject at a time approximately after said ventricular remodeling period.

9. The method of claim 8, wherein the angiotensin II (AT.sub.1) receptor inhibitor is administered twice daily.

10. The method of claim 8, wherein administration of said AT.sub.1 receptor inhibitor is discontinued at about the time growth hormone administration begins.

11. The method of claim 8, wherein the dosage of said AT.sub.1 receptor inhibitor following said ventricular remodeling period is less than about one half the dosage prior to the end of said ventricular remodeling period.

12. The method of claim 8, wherein said AT.sub.1 receptor inhibitor comprises losartan.

13. The method of claim 8, wherein said growth hormone is human growth hormone.

14. The method of claim 8, wherein said AT.sub.1 receptor inhibitor is administered beginning within seven days of said ischemic event.

15. The method of claim 8, wherein said AT.sub.1 receptor inhibitor is administered for about 8 to about 12 weeks.

16. The method of claim 15, wherein said AT.sub.1 receptor inhibitor is administered for about 10 weeks.

17. The method of claim 8, wherein said growth hormone is administered for about two weeks to about three months.

18. The method of claim 8, wherein a second administration of a composition comprising AT.sub.1 receptor inhibitor is administered for a period following growth hormone administration.

19. The method of claim 18, wherein growth hormone is administered following said second administration of AT.sub.1 receptor inhibitor.

20. The method of claim 8, wherein the decreasing the dosage of AT.sub.1 receptor inhibitor allows for a favorable physiologic hypertrophic effect from the growth hormone.